| Mes's PCT/PTO | 14 | DEC | 200A | |
|---------------|----|-----|------|--|
|---------------|----|-----|------|--|

PATENT APPLATION FEE DETERMINATION REC

Application or Docket Number

| <u> </u> | | | | | | | | <u>/ </u> | | |
|---|--|--|--|--|--|-------------------|------------------------|---|---------------------|------------------------|
| CLAIMS AS FILED - PART I | | | | | SMALL E | NTITY | OR | OTHER | | |
| - | | | (Column | (Column 1) | | , , , , , , | | ∪n 1 | SMALL | ENTITY |
| U.S. NATIONAL STAGE FEES | | | | | | RATE | FEE | | RATE | FEE |
| BAS | SIC FEE | | SMALL ENT. | | LARGE ENT. = \$ 300 | BASIC FEE | 150 | OR | BASIC FEE | |
| EXAMINATION FEE | | | Satisfies PCT Arti | \$ 100 | All other situations = \$ 100 / \$ 200 | EXAM. FEE | 100 | | EXAM FEE | |
| SEARCH FEE | | | U.S. is ISA = \$5 ALL other coun \$ 200 / \$ 4 | ntries = A | All other situations = \$,250 / \$ 500 | SEARCH FE | E 200 | | SEARCH FEE | |
| FEE | FOR EXTRA S | PEC. PGS. | minus 100 = /50 = | | /50 = | X \$ 125 | = | | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | 24 minus 20 = . 4 | | X \$ 25 = | 1.00 | OR | X \$ 50 = | | |
| INDE | EPENDENT CL | AIMS | 3 mir | 3 minus 3 = . | | | = | OR | X \$ 200 = | - |
| MUL | TIPLE DEPEN | DENT CLAIM PRE | ESENT | | | + \$ 180 | = | OR | + \$ 360 = | |
| · If | the difference | e in column 1 is t | less than zero. | enter "0" ir | n column 2 | TOTAL | 550 | OR | TOTAL | |
| | 1 | OA SARIA IO | AMENINEN | PARTI | • | | | - | | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column | | | | 2) (Column 3) | SMALI | LENTITY | OR | OTHER SMALL E | | |
| NTA | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUS PAID FOR | R PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE [.] | ADDI- TIONAL FEE |
| AMENDMENT | Total | . 24 | Minus | 4 | = | X \$ 25 = | 0 | OR | X \$ 50 = | 0_ |
| AME | Independent | . 3 | Minus | *** | | X \$ 100 = | = 0 | OR | X \$ 200 = | 0 |
| کر | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | + \$ 180 = | | OR | + \$ 360 = | 07 | |
| 3 | | | | | | TOTAL ADD | ir. | OR | TOTAL ADDIT. FEE | 0 |
| | · | (Çolumo 1) | | (Column 2 | 2) (Column 3) | | | | • | |
| AENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSI PAID FOR | PRESENT LY EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| OME | Total | • | Minus | te . | 3 | X \$ 25 = | | OR | X \$ 50 = | |
| AMENON | Independent | • | Minus | *** | 2 | X \$ 100 = | - | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | + \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | TOTAL ADDI | т. | OR | TOTAL ADDIT. FEE | |
| | | | | | | | | | • • | |
| • | ······································ | . d to town show all | | | | | | | | |
| •• | If the "Highest Nu | umn 1 is less than the umber Previously Pak | Id For IN THIS SPA | ACE is less tha | an "20", enter "20". | | •• | | | |
| • | | imber Previously Paid mber Previously Paid | | | an "3", enter "3". E highest number found i | in the anomoriate | horin cokuma 1 | | | |